B-12: PAYROLL FORM AND STATEMENT OF COMPLIANCE

U.S. Department of Labor Wage and Hour Division

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control numb

ur Division	OMB No.:1235-0008 Expires: 04/30/2021		(6)	NET	WAGES PAID FOR WEEK		
U.S. Wage and Hour Division Rev. Dec. 2008	OMB No.: Expires: 0	NO.			TOTAL DEDUCTIONS		
U.S.		PROJECT OR CONTRACT NO.			OTHER		
		PROJECT 0	(8) DEDUCTIONS				
.htm) er.			DEDI				

WITH-HOLDING TAX FICA GROSS AMOUNT EARNED 6 PROJECT AND LOCATION RATE OF PAY 9 (2) (4) DAY AND DATE FOR WEEK ENDING WORK 3 OR SUBCONTRACTOR NO. OF EXEMPTIONS 3 NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER NAME OF CONTRACTOR 3 PAYROLL NO.

# While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts is to the wages padded and an expension of the Web and the WH-347 is optional, it is mandatory for covered contractors between the Medical Manaced or assisted construction contracts in 1/mans weekly a statement of 1 bate of 1001. Pegabators and automaticates performing where the Medical Manaced or assisted construction contracts in 1/mans weekly a statement of 1 bate of 1001. Pegabators are assisted construction contracts to the weekly a statement of 1 bate of 1001. Pegabators are assisted construction or the Medical Manaced or assisted statement of 1 bate of 1001. Pegabators are assisted to a statement of 1 bate of 1001. Pegabators are assisted to a statement of 1 bate of 1 bate

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the deata needed, and completing and reviewing the collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room \$3502, 200 Constitution Avenue, N.W. Washington, D.C., 20210

Public Burden Statement

		(b) WHERE FRINGE BENEFITS ARE PAID IN CASH	CASH
(Name of Signatory Party)	(Title)	<ul> <li>Each laborer or mechanic lis as indicated on the payroll, a</li> </ul>	Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable
do hereby state:		basic hourly wage rate plus the amount of the required in the contract. except as noted in section 4(c) below.	basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.
(1) That I pay or supervise the payment of the persons employed by	s employed by	(c) EXCEPTIONS	
	on the	2001 1202 (2)	
(Contractor or Subcontractor)		EXCEPTION (CRAFT)	EXPLANATION
	; that during the payroll period commencing on the		
(Building or Work)			
day of , and ending the	the day of .		
yed on said project have been ade either directly or indirectly	Il weekly wages earned, that no rebates have half of said		
	from the full		
(Contractor or Subcontractor)			
weekly wages earned by any person and that no deduction	is have been made either directly or indirectly seems but		
of smith relative ways sentency any pages, other latin permissible conductors as defined in regulations, rain and 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967, 76 Stat. 357, 40 U.S.C. § 3145), and described below.	noter the Copeland Act, as amended (48 Stat. 948, and described below:		
		REMARKS:	
(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract, that the classifications set forth therein for each laborer or mechanic conform with the work he performed.	quired to be submitted for the above period are lechanics contained therein are not less than the incorporated into the contract; that the classifications the work he performed.		
(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.	are duly registered in a bona fide apprenticeship agnized by the Bureau of Apprenticeship and recognized agency exists in a State, are registered tes Department of Labor.		
(4) That: (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS	APPROVED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE	SIGNATURE
in addition to the basic hourly wage	in addition to the basic hourly wage rates paid to each laborer or mechanic listed in		
the above referenced payroll, payrr have been or will be made to approp	the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees,	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBJECT MAY SUBJECT TO TOTAL OF TITLE 18 AND SECTION 2.	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBJECT THE CONTRACTOR TO THE ABOVE STATEMENTS AND SUBJECT THE STATEMENT OF THE STATEMENT

## **Comments Regarding the Payroll Form**

# (Prepared by the Labor Compliance Officer of the Office of Community Development)

<u>General:</u> Department of Labor Form WH-347 has been made available for the convenience of contractors and is not mandatory. Properly completed, this form will satisfy the requirements of the LCDBG program. Form WH-347 along with instructions in greater detail can be found at: <a href="https://www.dol.gov/agencies/whd/forms">https://www.dol.gov/agencies/whd/forms</a>.

<u>Heading Information:</u> Fill in the contractor name, address, payroll number, week ending date, project location, and LCDBG project number.

Payrolls are numbered according to weeks having work activity. Example: Work was done during weeks one and two but the work was stopped due to rain during weeks three and four. Work resumed and the job was completed during week five. The payrolls for the entire project would be numbered 1-initial, 2, and 3-final. The prime contractor should inform the grantee's Labor Compliance Officer, weekly, for any week during which there is no work done. "No work" payrolls are not required.

<u>Column 1 — Name and Individual Identifying Number:</u> In this block, enter the complete name, and the individual identifying number (i.e. last four digits of the social security number of each employee).

<u>Column 3 — Work Classification</u>: Enter the classification as it is listed on the applicable Davis-Bacon wage decision. Note that "Operator" is not a proper classification since such a classification does not come directly from any wage decision. However, "Backhoe Operator" may be a proper classification if such a classification is on the applicable wage decision.

<u>Columns 4 & 5 — Hours Worked and Total Hours:</u> Only enter hours worked on the LCDBG project — not hours from any other job.

Column 6 — (Hourly) Rate of Pay: Enter the rate of pay on the LCDBG project, including any cash paid in lieu of fringe benefits. When fringes are paid in cash, the preferred method is to differentiate between basic hourly pay and fringe benefits paid in cash in column 6 on the straight-time row. On the overtime row of column 6 enter the overtime rate of pay including amount paid in cash for fringes. An example follows where John Doe is paid \$10.00 basic hourly rate with \$3.00 in fringe benefits paid in cash. The overtime rate of \$15.00 is 150% of the basic hourly rate of \$10.00 — then add the \$3.00 for each hour of fringe benefits. The amount due for each overtime hour becomes \$18.00. In contrast, if the basic hourly rate would not have been identified separately from the fringe and entered as a single figure of \$13.00 then the 150% would have to be applied to the full \$13.00 resulting in a higher overtime rate requirement of \$19.50.

			Column 6
John Doe	5555	О	18.00
		S	\$10.00 3.00

<u>Column 7 — Gross Amount Earned:</u> This column has blocks which are split into two parts, the upper left and the lower right. In the upper left portion of the block enter the gross amount earned from the LCDBG project. In the lower right portion of the block enter the gross amount earned from all projects.

<u>Column 8 -- Deductions and Column 9 — Net Wages:</u> Deductions are to be based on all projects, both LCDBG and non-LCDBG, and will be deducted from the weekly gross amount earned from all projects. Likewise, net wages are based on all projects.

<u>The Second Page of WH 347—The Statement of Compliance:</u> The following instructions for the Statement of Compliance are quoted directly from the Department of Labor's instructions that accompany the Payroll Form, WH 347.

(*Begin quotation*) Item 4 FRINGE BENEFITS - Contractors who pay all required fringe benefits: If paying all fringe benefits to approved plans, funds, or programs in amounts not less than were determined in the applicable wage decision of the Secretary of Labor, show the basic cash hourly rate and overtime rate paid to each worker on the face of the payroll and check paragraph 4(a) of the statement on page 2 of the WH-347 payroll form to indicate the payment. Note any exceptions in section 4(c).

Contractors who pay no fringe benefits: If not paying all fringe benefits to approved plans, funds, or programs in amounts of at least those that were determined in the applicable wage decision of the Secretary of Labor, pay any remaining fringe benefit amount to each laborer and mechanic and insert in the "straight time" of the "Rate of Pay" column of the payroll an amount not less than the predetermined rate for each classification plus the amount of fringe benefits determined for each classification in the application wage decision. Inasmuch as it is not necessary to pay time and a half on cash paid in lieu of fringe benefits, the overtime rate shall be not less than the sum of the basic predetermined rate, plus the half time premium on basic or regular rate, plus the required cash in lieu of fringe benefits at the straight time rate. In addition, check paragraph 4(b) of the statement on page 2 the payroll form to indicate the payment of fringe benefits in cash directly to the workers. Note any exceptions in section 4(c).

### Use of Section 4(c), Exceptions

Any contractor who is making payment to approved plans, funds, or programs in amounts less than the wage determination requires is obliged to pay the deficiency directly to the covered worker as cash in lieu of fringe benefits. Enter any exceptions to section 4(a) or 4(b) in section 4(c). Enter in the Exception column the craft, and enter in the Explanation column the hourly amount paid each worker as cash in lieu of fringe benefits and the hourly amount paid to plans, funds, or programs as fringe benefits. The contractor must pay an amount not less than the predetermined rate plus cash in lieu of fringe benefits as shown in section 4(c) to each such individual for all hours worked (unless otherwise provided by applicable wage determination) on the Federal or Federally assisted project. Enter the rate paid and amount of cash paid in lieu of fringe benefits per hour in column 6 on the payroll. See paragraph on "Contractors who pay no fringe benefits" for computation of overtime rate. (End Quotation)

An additional quotation from the US Department of Labor's instructions for Form WH 347 regarding the Statement of Compliance states penalties for falsification.

(Begin Quotation) "Statement Required by Regulations, Parts 3 and 5: While the "statement of compliance" need not be notarized, the statement (on page 2 of the payroll form) is subject to the penalties provided by 18 U.S.C. § 1001, namely, a fine, possible imprisonment of not more than 5 years, or both. Accordingly, the party signing this statement should have knowledge of the facts represented as true." (*End Quotation*)